Nebraska Medicaid's New Integrated Managed Care Program



HEALTH AND HUMAN SERVICES COMMITTEE

OCTOBER 19, 2016

Department of Health & Human Services



Current Nebraska Medicaid

- ▶ Nebraska Medicaid provides health care coverage to approximately 230,000 people at an annual cost of approximately \$2 billion.
- ▶ 12% of Nebraska's population is enrolled in Medicaid.

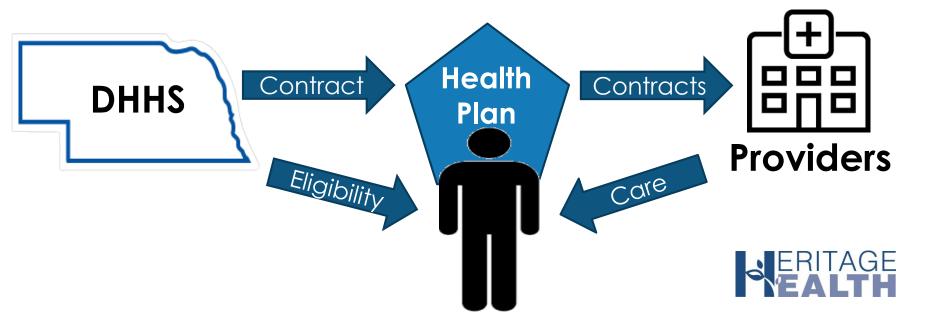


- Children birth through age 18
- Blind & disabled
- Low-income parents and caretakers of children
- Low-income elderly



What is "Managed Care"?

 Managed Care is a system of health care delivery in which the State contracts with managed care organizations (MCOs) – also referred to as "Health Plans" – to administer health care benefits and services for our members.



Current Managed Care

- Nebraska Medicaid contracts with:
 - ▶ Three regional MCOs for physical health services
 - A separate managed care entity for behavioral health services
 - A pharmacy benefit management contractor for pharmacy claims processing services (not at-risk)
- An individual receives his or her health care through three separate contractors.
- ▶ 82% of Medicaid clients are enrolled in physical health managed care and more than 99% are enrolled in behavioral health managed care.



New Integrated Managed Care Program: Heritage Health

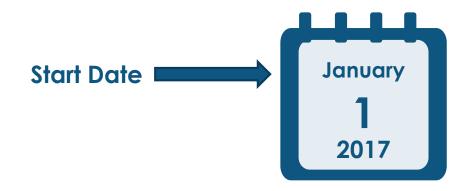
Nebraska Medicaid has signed contracts with three health plans:







Each health plan will coordinate a full range of services statewide, including physical health, behavioral health, and pharmacy services.





Heritage Health Goals

- Improved health outcomes
- Enhanced integration of services and quality of care
- Emphasis on person-centered approach, care management, enhanced preventive services, and recovery-oriented care
- Reduced rate of costly and avoidable care
- Improved financially sustainable system





Key Health Plan Responsibilities

- Administering covered benefits
- Care management
- Quality management
- Utilization management
- Provider network management
- Continuity of care



Benefits and Coverage

- All Heritage Health plans offer the same package of covered health services.
- Each plan also offers a variety of "extra" benefits and services that aren't part of the Medicaid benefit package.
- Some services aren't part of Heritage Health, but are still covered by Medicaid. These include:
 - Dental services
 - Non-emergency transportation
 - Long-term services and supports (LTSS), including:
 - Personal Assistance Services (PAS)
 - Long-term care in a facility
 - Home and community-based waiver services (HCBS) for those eligible



Behavioral Health Integration

- Designed to better address co-occurring mental illness and substance use disorders – focus on the whole person
- Plans are financially and contractually incentivized to invest in preventive and community-based care
- MLTC established a behavioral health integration advisory committee to guide transition, including work to:
 - Adopt common service definitions
 - Plan for continuity of care
 - Educate and ready the provider community



Pharmacy Integration

- ▶ Today, pharmacy services are administered by the state. Under Heritage Health, the health plans will assume responsibility for this benefit, with specific requirements:
 - ▶ Health plans must cover all classes of drugs covered under the Nebraska Medicaid formulary, and must also follow the state's preferred drug list (PDL).
 - ► Health plans are also required to accept any pharmacy participating in the Nebraska Medicaid program today into their network.





Contracting and Credentialing

- Providers MUST be enrolled as Nebraska Medicaid provider (through Maximus) to participate in the Health plan's network.
- Plans are required to move delivery system toward more value-based reimbursement arrangements, continue PCMH focused initiatives.
- Plans are actively contracting and credentialing providers. Plans are required to:
 - Demonstrate network adequacy by provider type and specialty
 - Accept CAQH as common source of credentialing information
 - Process credentialing applications within 30 days of receipt of a complete application



Health Plan Enrollment

- DHHS has contracted with Automated Health Systems (AHS) to serve as the state's "enrollment broker" for Heritage Health. AHS is providing:
 - Written and phone-based member outreach
 - Comprehensive and unbiased choice counseling
 - Health plan selection via mail, phone, or electronic methods
 - Searchable provider directories
 - Auto-assignment of members who elect not to choose a health plan on their own





Choosing a Plan

- Members who will need to choose a health plan will receive an enrollment packet in the mail. Mailing have begun and will continue over the next few weeks.
- There are four different ways to choose a plan:
 - Online at <u>www.neheritagehealth.com</u>
 - **By phone** by calling toll-free at 1-888-255-2605 Monday through Friday, 7am to 7pm.
 - **By mail** by returning the enrollment form included in the packet.
 - ▶ **By fax** by returning that same form to 1-800-852-6311.
- Members who don't choose a plan by Dec. 1 will be assigned to one by AHS using a method that will try to preserve family and provider relationships.
- ► All members will have 90 days to change plans after January 1st if they would like, or wait for open enrollment in the Fall.

Open Enrollment Packet

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Welcome to Heritage Health! Heritage Health is Nebraska Medicaid's new Managed Care program. Herit gives you one health plan for your health needs. It includes doctor's visits, prescriptions, and other service Medicaid. Heritage Health has three different health plan options for you to choose from. You can choose that best fits you and your family's needs.

The household member(s) listed below need to choose a health plan:

You can use this security PIN to enroll over the phone or on the website: <4digitPIN				
Member Name	Member Medicaid ID #	Selection Date		
<recipientname></recipientname>	<recnientmedicaididnum></recnientmedicaididnum>	<selectiondate></selectiondate>		

Please act quickly! If yo

Information on how to c





Your Medicald is changing. Heritage Health is the new Medicald managed care pro

What is covered by Heritage Health? Heritage Health plans cover your:

- · Physical health,
- Behavioral health, and
 Medicines.

What are physical health, behavioral health, and medicines? wind are physical mealin, benavioral neatin, and meacines? Doctor visits, prescriptions, hospital; mental health; emergency room; visit supplies and equipment, chiropractic visits; skilled nursing; famil CHECKEPSDT; therapies; hearing and hearing aids; x-rays and lab worl-hospice; birthing center; transplants; and treatment for substance abuse

I got a Heritage Health mailing, do I need to pick a plan? Yes. Heritage Health will cover your physical health, behavioral health, and

What isn't included in Heritage Health? Dental, home and community-based waiver services, and nursing home ho

Will home and community-based waiver services change?

Do I choose my own Heritage Health plan? Yes. There are three plans you can choose from:

- UnitedHealthcare Community Plan of Nebraska
 WellCare of Nebraska

What if I miss my deadline to choose a Heritage Health plan? One will be chosen for you.

What if I don't pick a plan?

What if I don't like my Heritage Health plan? All members will have 90 days to change plans after January 1, 2017. You can also ask to change



Interpretation Services Available

Hay información en español.

¡Servicio de intérprete gratis!

Llame al 1-888-255-2605 (TTY/TTD 711)

Keep this Member Guidebook for future us

HEALTH DIAN RENEETS AND CONTACT INCORNATION

BENEFITS	nebraska total care	U u	InitedHealthcare	WellCare'	
Contact Information	Nebraska Total Care Phone: 1-844-385-2192 TTY/TDD: 1-844-307-0342 www.nebraskatotalcare.com	Phone 1	Community Plan of Nebraska e: 1-800-641-1902 TTY/TDD: 711 ommunityplan.com/ne	WellCare of Nebraska Phone: 1-855-599-3811 TTY/TDD: 1-877-247-6272 www.wellcare.com/nebraska	
All Covered 100%	Primary Care Visits, Immunizations, Family Planning, Pregnancy, Hospital Services, Home Health Care, and Emergent/Urgent Care				
Co-Pays	Children (18 and under), pregnant women and Native American members are exempt from co-pays				
Wellness	Covered 100% (annual exams, Weight Watchers, CentAccount, YMCA memberships)	Covered 100% (annual exams, well-child visits, preventative services; Rewards Program)		Covered 100% (annual exams, well-child visits, Weight Watchers, Healthy Rewards Program)	
Prescriptions	Generic - covered 100%, Brand - \$3 copay	Covered 100%		Generic - covered 100%, Brand - \$3 copay	
Over-The-Counter Drugs/Supplies	Covered 100% with your doctor's prescription				
Healthy Kids	Rewards Program for well-child visits Healthy Promotion: Monthly school programs Back-to-School Programs Keep It Moving: Child obesity program Sports Camp Physical: 1 per year per member, ages 5-18 years old	Rewards Program for well-child visits (MsHealth*: The website has information by topics, health quizzes, games and videos 4-H and Sesame Street: Program on asthma, food nutrition and healthy habits Dr. Health E. Hound*: Mascot delivers nutritional education and promotes fitness and healthy habits.		Rewards Program for well-child visits JumpStart: Gets kids off the couch and moving Special kids-only events and programs: Kids go hands-on tools and activities like: Invitations to local fitness events Cool and fur rewards for healthy habits Kids newsletters about fitness and nutrition	
Care and Disease	Offers special programs for chronic diseases, sickie cell anemia, asthma, diabetes, heart disease, smoking cessation, pregnant mothers and babies, care coordination, intensive care Enrollment Form	Offers special programs for pregnant moms, chronic diseases, asthma, diabetes, heart diseases, ADHD, substance abuse, mental health issues. Offers rewards like a gift card for chronic il care visits and mobile app tation services available. ty social service programs.		Work with members one-on-one to help manage care needs, provide weight-loss tips, help to stop smoking, and help with chronic diseases like asthma, diabetes or HIV/AIDS. Tele-Monitoring Management System which measures and sends data to a WellCare nurse, provider or caregiver.	
The <u>FASTEST</u> and <u>EASTEST</u> ways to evoid in a health plan is on our website. Go to <u>user_reherchapeleath</u> , Or, call 1488-265-2006 TTVTIOD call 719, We are given 7-m-7m Monday-Priday central time. Please fill out every section on this form.			with access to	Covered 100%; Online cognitive behavioral therapy through COBALT Therapeutics Program	

WellCare of Nebraska Nebraska Total Care WellCare of Nebraska WellCare of Nebraska Nebraska Total Care

HOH Medicald ID or PIN:

WellCare of Nebraska

Use the pre-paid envelope in this packet to mail this form to: Heritage Health Enrollment Center 5370 McKnight Road, Suite 300 Pittsburgh, PA 15237



alth.com

People New to Managed Care

- Some individuals will be choosing a health plan that have never chosen a health plan before. These include:
 - People who are on one of the home and community based waivers
 - (Aged and Disabled waiver, Traumatic Brain Injury waiver, and the Developmental Disability waivers)
 - ▶ People live in a long-term care facility, like a nursing home or home for people with developmental disabilities.
- No one can "opt out" of choosing a health plan. Heritage Health will be the Medicaid delivery system for most benefits and nearly all enrollees beginning January 1, 2017.



Long-Term Care Redesign

- While these services aren't changing under Heritage Health, the state is exploring ways to improve the long-term care system through the Redesign project, which aims to help provide Nebraskans:
 - ▶ Healthier people
 - Quality services
 - Easier access to services

- Support during health and care changes
- ► A system that helps providers help people
- ▶ An affordable program
- ▶ Help to live the way they want, where they want
- Help to figure out the services they need
- DHHS held public meetings across the state in September to get ideas about making changes to the long-term care Medicaid system in Nebraska.
- More meetings will be held after draft recommendations are published next year.
 - dhhs.ne.gov/LTC
 - dhhs.ltcredesign@nebraska.gov



Continuous Feedback



Administrative Simplification



Behavioral Health Integration



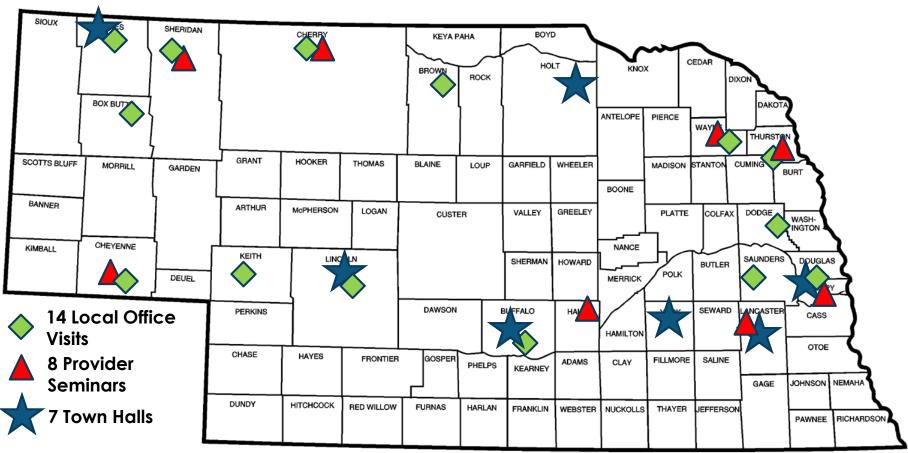
Quality Management

Nebraska's Heritage Health Advisory Groups



September 6-14: 8 days, 1100 miles, countless cups of coffee...





Additional opportunity for providers:
MCOs will host 14 provider orientation sessions
across Nebraska in October and November.

Questions

For more information about Heritage Health visit us online: www.dhhs.ne.gov/heritagehealth





Nebraska Medicaid #DHHSMLTC

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